Ser 0.6 2018

for Yes No	et all three tests for	a spouse or dependent child because they me	ned" income, or liabilities of a	EXEMPTION - Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
od	Have you exclude	ther "excepted trusts" need not be disclosed.	ittee on Ethics and certain o endent child?	TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust that benefits you, your spouse, or dependent child?
SNC	OF THESE QUESTIONS	,	ST INFORMATION	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER <u>BOTH</u>
M	QUIRED TO COMPLETE	THAT YOU ARE REQUIRED TO	Y THE SCHEDULES	THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE RE
	S,	ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"	RRESPONDING SC	ATTACH THE CO
Yes No V	an \$5,000 from a or years?	J. Did you receive compensation of more than \$5,000 from a single source in the current year and 8x9 prior years?	Yes No V	D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?
than Yes No Z	r arrangement with n the current caler	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing?	Yes No	C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?
iling? Yes No 🚺	ing the reporting ough the date of fill	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing?	Yes No	Did you, your spouse, or your dependent child:     Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? of the reporting period? of the Receive more than \$200 in unearned income from any reportable asset during the reporting period?
		TIONS	OF THESE QUES	PRELIMINARY INFORMATION – ANSWER <u>EACH</u> OF THESE QUESTIONS
A \$200 penalty shall be assessed against any individual who files more than 30 days late.	A \$200 penalty Individual who	Period Covered: January 1, 2018 to 5/22/18	Staff Filer Type (If Applicable): Shared Principal Assistant	New Officer or Employee States Shares
(Office Use Only)		Check if Amendment	5/22/18	New Member of or Candidate for State: K  U.S. House of Representatives District: L  Candidates – Date of Election: Pr Mary
U.S. HÖUSE OF REPRESENTATIONS	9.8.800	hope.	Daytime Telephor <sup>c</sup> .	Name: Geoffrey M. Young
Page 1 of 5 LEGISLATIVE RESOURCE CENTER	TEGIST	FORM B For New Members, Candidates, and New Employees		UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT

## SCHEDULE A -- ASSETS & "UNEARNED INCOME"

Name: Geoffrey M. Young

Page

a 5

Europeies   Ky Deferred Gmf-   X   X   X	For bank and other cash accounts, to all interest-bearing accounts, to all interest-bearing accounts, to the \$5,000. If at every financial institution more than \$1,000 in Interest-bearing a provide a complete a provide a complete a compl	2018		285	9	
Find X X X X X X X X X X X X X X X X X X X	the state of the s	SEXCERCIS SING	which generated more than to which generated more than to income during the year. Provide complete names of stoc (do not use only licker symbols). (do not use only licker symbols). For all IRAs and other retirent d01(k) plans) provide the value to d01(k) plans) plans to d01(k)	identify (a) each asset he production of income and we acceeding \$1,000 at the end	Assets and/or income Sources	BLOCK A
Industria X X X A A A A A A A A A A A A A A A A	itial the amouse local is a coloral is on where there eccounts.  If of investme eccounts, is of for investme eccounts, is of investment of fivilies, and tivilies, and tivilies, and tivilies, and from, a feed from, a feed from, a feed from the is check the Timbouse (SP) with an asset spouse (SP).	aporang unuancom.	income during the year. \$200 in 'uneamed' income during the year. Frovide complete names of stocks and mutual funds (do not use orly licker symbols).  For all IRAs and other retirement plans (such sections).	identify (a) each asset held for investment or production of income and with a fair market value exceeding \$1,000 at the end of the reporting period.	ome Sources	>
X X X A A A A A A A A A A A A A A A A A		-				4
X X X A A A A A A A A A A A A A A A A A		>	None." Column	dica adica		
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X X X A A A A A A A A A A A A A A A A A		m	if an esset was acid during the eyo only because it generated inco "None." "Column M is for sesets held by I child in which you have no interest	2 0 st	Valu	
X X X A A A A A A A A A A A A A A A A A	arrante des arrante de matematicament de matematica de mat		ind die	COM	90	5
X X Annuality	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	G	If an asset was sold during the reporting period and is included only because it generated income, the value should be "Yone." "Column M is for assets hald by your spouse or dependen child in which you have no Interest.	indicate value of asset at close of the reporting period. If you use a valuation method other than fair market value, please specify the method used.	Value of Asset	BLOCK B
X X Annuality		2	9 8	黄 3	8	
X X Annuality			period and is include the value should be spouse or dependen	merk:	_	
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X X Annuality	······································		and a co	P 4		
X X Annuality	NONE		A 123 E			-
X X Annuality	ONICE  ONE OF THE PROPERTY OF THE APPLICATION AND APPLICATION OF THE PROPERTY	nanturi, mi	belierest, and capital galtes, reliverated, must be disclosed for assets held in taxable accountions. If the asset generated during the reporting period.	(E) Q X		
And the state of t			8 = 8 6 7	700		
And the state of t	RENT		8 4 2 2	0.00	궇	
And the state of t			Ser and	26.6	0	E
	CAPITAL GAINS		disclos disclos able so generat generat	200	Type of Income	BLOCK C
	EXCEPTEDABLINO TRUST		2 6 6 6	2 2 2	Š	°.
	TAX-DEFERRED		8 3 4 4	Check all columns that apply. For accounts that generate tax-deferred income (such as 401(k), IRA, or 629 accounts) you may check	3	
	Other Type of Income (Specify: e.g., Partnership Income or Farm Income)		2779			
	None	1	*Column	Capt of a		
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× (a) ×	\$2.501-\$5,000	氰	sset inco	S Cat		ı
XXX	\$5,001-\$15,000 S	Current Year	the if no income was earned or generator. (If is for assets held by your spouse or dependent child in which you have no interest	don't		ł
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	Spouse/DC Income over \$1,000,000°	4		diam'	2	8
	None -	†	and a	S S C	Amount of Income	BLOCK D
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×	\$201-\$1,000	1	<u> </u>	Stroom Stroom	MK	
X	\$1.001-\$2,500	1	*	2 a 2	•	Į
	\$2,501-\$5,000	Ĭ	E V	OX CX		1
×	\$5,001-\$15,000 S	42	5	To a		ł
×		18	848	\$ 25 g		į
	\$15,001-\$50,000	*	<b>⋽</b>	508		
	\$100,001-\$1,000,000	14	3	T T		
	\$1,000,001-\$5,000,000 ×	1		For assets for which you checked "fax-Deferred" in Block C, you may check the "None" column. For all other assets indicate the category of income by checking the appropriate box below. Dividends, Internet, and capital gains, even if reinvested, must be disclosed as income for assets held in taxable accounts.		ł
	Over \$5,000,000 &	1		real con		1
	Spouse/DC Income over \$1,000,000"	1		7 7		1

### SCHEDULE C - EARNED INCOME

Name: Geoffrey M. YOUNG Page 3 of 5

List the source, type, and amount of earned income from any source (other than the flier's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the flier and flier's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

INCOME LIMITS and PROHIBITED INCOME: Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2017 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,765. The 2018 limit is \$28,050. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act

	Prison (include date of receipt to be becoming)	Tunn		Amount
	Source (include date of lecelot of horioralia)	ı ype	Current Year to Filing	Preceding Year
	ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
Examples:	State of Maryland	Selary	\$29,000	\$76,000
	Ontario County Board of Education	Spouse Salary	WA	WA WA
Kentucky	Kentucky Retirement Systems	Pension	\$3,248	\$4,872

#### SCHEDULE D - LIABILITIES

Name: Geoffrey M. Young

Page 4 of 5

liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. \*Column K is for liabilities held solely by your spouse or dependent child. Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. New Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and

•		4				Singuity of Flaguity	Amount of Liability
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#### SCHEDULE E - POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. New Members and second-year candidates report positions held in the reporting period and the current calendar year and two previous years.

period and the curient calendar year. Protyger canadam	DEFINITION CHIEF AND THE CHIEF SHAFT CHIEF CHIEF SHIP HER SHIP SHEET IN DOCUMENTS HOW IN CHIEF SHIP SHIP SHIP SHIP SHIP SHIP SHIP SHIP
Position	Name of Organization
None	

#### SCHEDULE F - AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former arrangement.

employer.		
Date	Parties to Agreement	Terms of Agreement
2005	Ky. Retroment System	Month 1 pension = \$406

# SCHEDULE J - COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Report sources of compensation received by you or your business affiliation for services provided directly by you during the current year and two prior years. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise if you directly provided the services generating a fee or payment of more than \$5,000. Exclude: Payments by the U.S. government and any information considered confidential as a result of a privileged relationship recognized by lew. Do not repeat information listed on Schedule C.

So. de l'interne de	and another contract of the contract the contract to	Section first the first selection of the section of
	Source (Name and City/State)	Brief Description of Duties
Example:	Doe Jones & Smith, Hometown, Homestate	Accounting Services